DIVISION OF CLINICAL AND ABNORMAL PSYCHOLOGY

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NEWS

FROM THE SECRETARY-TREASURER'S OFFICE:

The Secretary's Office has just completed a revision of its address file in accordance with the APA's mailing list. At least one-third of all addresses on file were obsolete. This is to urge the membership to notify the Secretary's Office of any new or contemplated address changes so that the mailing list may be kept up to date and so that all Division members may receive the Division correspondence.

For those members who have not been receiving their Newsletters and who thus may not have been notified of the Division assessment, a red slip is attached to the front page of this issue. Please pay this Division assessment promptly since the end of the fiscal year is approaching and a complete financial statement must be made. If you intend to resign from the Division, please notify the Secretary's Office of your intent at your earliest convenience.

PSYCHOTHERAPY COMMITTEE:

The analysis of the Psychotherapy Committee questionnaire is progressing satisfactorily and is expected to be finished before the Membership Meeting. Additional contributions toward the cost of the analysis have been received from the following people in the total sum of \$25: Cameron, N., Edwards, F.M., Hopkins, P., Oxtoby, E. The total contributions toward the analysis are now \$404.

The following is a letter from Dr. Donald Fiske concerning a misstatement in the last Newsletter: "In the Newsletter of the Division, Vol. 2, No. 5, p. 5 (June), there is a statement: 'The coverage of the residue is guaranteed by the Research Project on the Selection of Clinical Psychologists, conducted formerly at the University of Michigan and at present at the University of Chicago. The facts are that Michigan still has the prime contract with the VA, and that Chicago is arranging a subcontract with Michigan primarily to work on that part of the research which deals with the development of measures of clinical competence."

JOINT COMMITTEE OF THE DIVISIONS OF PERSONALITY AND CLINICAL PSYCHOLOGY:

The Joint Committee from the Divisions of Personality and Clinical will sponsor at the 1949 annual meeting of the APA a symposium, chaired by J. McV. Hunt, on "Personality Theory and Psychotherapy". The APA Program will also include a round table devoted to Current Research on the Picture-Frustration Study. The participants are John Bell, G.E. Lindzey, J.L. McCary, Irving Simos, E.L. Mirmow, G.R. Schmeidler, H.W. Sinaiko, L.J. Stone; S. Rosenzweig, Chairman.

MEMBERSHIP COMMITTEE:

The Membership Committee completed the revision of the membership application blank in keeping with the instructions of the Membership Meeting in Boston in September and the Executive Committee meeting of December 4 in New York. All the applicants who have submitted their application since the deadline of February 15 will be requested to fill out this new application blank also. The officers would like to express their regret over this inconvenience and ask the forebearance of the applicants in question with the reminder that they are bound to this procedure by the Membership Meeting and

Executive Committee meeting decisions. The total number of new applications as of this date is 157 requests for the application and 26 returns of application blank.

EXECUTIVE COMMITTEE:

The Executive Committee was canvassed concerning the Council of Representatives' and the Board of Directors' action on the recommendations of the APA Committee on Training in Clinical Psychology. The Executive Committee was evenly divided on the issue, approving, 3 disapproving and 4 abstaining from comment on the action of the Board of Directors of the APA. This division of vote indicates that continued discussion and clarification at the Membership Meeting is urgently needed.

PROGRAM COMMITTEE:

The Program Committee completed its task and the programs developed by it will be published in the next Newsletter for the convenience of the membership at the Convention.

NOMINATIONS AND ELECTIONS COMMITTEE:

This Committee has completed the work on nominations as you saw in the election ballot mailed out by the APA. The next Newsletter will carry the results of the election. The Committee is assisting the President-Elect in preparing the committee slates for the next year so that the work of the Committees and the Division can start immediately after the Membership Meeting.

FROM THE EDITORS OF THE NEWSLETTER:

Mail your summer address in to the Secretary's Office so that the last Newsletter of the year to be mailed out on the 15th of August can reach you before the Denver meetings.

LETTERS FROM THE MEMBERSHIP

LETTERS CONCERNING THE PLANNED ORGANIZATION OF PSYCHOLOGISTS IN PRIVATE PRACTICE:

These letters are of import more because they open up a series of problems of importance to the whole membership than because of the proposal to form a Division of Psychologists in Private Practice.

From E. Parl Welch: "As one who is in private practice I want to express my enthusiastic endorsement of this proposed Division. The reason for this is that we in private practice would then be able to have much more to say regarding policies, ethics and objectives in the field of psychotherapy than we now can under the present Divisional setup. This means, of course, that the time has come to take cognizance of the actual differences between the academically minded, clinical psychologists and those who have gone beyond to obtain analytic training and orientation which qualifies them to do deep, and more effective, psychotherapeutic work. The establishment of this new Division would, I believe, be a step forward in this direction. Please call this endorsement to the attention of those in whose hands rests the power to create the Division."

From Kenneth J. Cox: "I examined the list of charter members of the 'Association of Psychologists in Private Practice' and the membership of the Division of Clinical and Abnormal Psychology as reported in the recent APA yearbook. Approximately 15 per cent of the membership of the 'Association of Psychologists in Private Practice' are members of the Division of Clinical and Abnormal. This would seem to indicate that the psychologists in private practice are not fundamentally a clinical group, therefore it is rather difficult to see the necessity of any concern over a minority grouping.

"Re your question: 'Is it in the best interests of clinical psychology and psychology at large that at the present stage of our relations with psychiatry and medicine an association explicitly stating the private practice aspirations of psychologists appear on the scene?' There are a number of areas such as vocational guidance and adjustment, employee selection, industrial test validation, etc., etc., that are specifically areas in which only the psychologist can do a professional piece of work, and these and other areas are ones in which the psychiatrists' opinion has little or no professional significance. A closer examination of the areas in which only the psychologist can do a

the membership of the 'Association of Psychologists in Private Practice' may indicate that these are the areas in which they are working, and they only can make a contribution on a professional level. If this is the case and one is inclined so to believe, if the 15 per cent overlap in membership is significant, then the problem of relationship with the psychiatrist is as significant as the 15 per cent overlap in membership."

From George R. Bach: "While an increasing number of Ph.D. clinical psychologists are in fact going into private practice, many leading members of the Division of Clinical and Abnormal Psychology have publicly expressed their opinion to the effect that the private practice of clinical psychology is not a desirable activity for APA members. The leadership of the Division of Clinical and Abnormal Psychology is dominated by individuals whose main economic and professional status and security is vested in their being associated with a strong institution, such as a university, a hospital, a Government or private research agency, etc. While this constellation of personnel is historically understandable, it does not minimize the importance of the fact that the lack of institutional association of the privately practicing person brings up problems for him which are not experienced and, therefore, not readily understood by the psychologist who

is institutionally affiliated.

"In view of the afore-mentioned state of affairs, it is most plausible to expect the privately practicing people to get together and have a group of their own who can understand and work on solutions of their problems, problems which derive from the peculiar and, at the present time, rather difficult place that the privately practicing psychologist has in the community of other practitioners. It is my opinion that the present Committee on Private Practice within the structure of the Division of Clinical and Abnormal Psychology is a fair gesture but not a vigorous enough representation of the problems, interests, and contributions that the private practitioners have and can make within the total group of psychologists. The frame of reference of the majority of the members and especially of the leading members of the Division of Clinical and Abnormal Psychology is that of the institutional or teaching clinician, and it is obvious that this frame of reference is a different one than that of the privately practicing clinician. It is natural, therefore, in a social group structure, such as the APA to have this difference of frame of reference recognized within the group structure, and I suggest that this could best be done, not through a separate association, but through a separate 'Division of Practicing Psychologists'.

"I believe that the creation of a separate division in the APA to represent the problems and interests of privately practicing clinicians and to provide for them a regular meeting ground and exchange place would be a constructive step, not only from the point of view of the practioner, but also from the point of view of the APA as a whole, for the private practioner is in many respects the spearhead for the profession as a whole. He is the person that comes in contact with the public and comes in competitive contact with other members of related professions. It would be wise, I believe, to make a place where the experiences that the privately practicing people have, in relation with the public and in relation with other professions, have an opportunity to be crystallized, observed, and carefully studied by the membership and the leadership of the APA as a whole. I am afraid if we do not give an important place to the privately practicing clinical psychologists we will force them to associate independently of the

APA which I believe would be a very unfortunate development."

From H. Meltzer: "In the June, 1949, Newsletter of the Division, the editors reacted negatively toward the individuals involved in an effort to organize an Association of Psychologists in Private Practice. With some of their reasoning I am in accord, but not with all. My own impression is that there definitely are differences between people who work in an institutional set-up and people who are in private practice, and that some of these differences warrant separate grouping for some purposes. However, I am not sure that the Committee on Private Practice in this Division is enough for a well-defined grouping. It strikes me that anyone who is in private practice and is professionally well enough prepared for it could and should join the Consulting Psychology Division, instead of organizing another new division. They could remain in the Clinical and Abnormal Division for knowledge and techniques as they develop, but for applications as far as private practice is concerned, it seems to me that the

logical division is the Consulting Division, which is already in existence and in a position to satisfy the emphasis and interests of a group interested in private practice.

"In the Consulting Division, there are people who belong to the Industrial and Business Division as well as the Clinical and Abnormal Division. The people who do belong there do have interests as consultants. Hence, to repeat my reaction is that a grouping seems warranted, but that the more realistic and sensible solution is not by way of organizing another separate division, but to use a division already organized. In this instance, my own impression is that it should be the Consulting Division.

"In the Newsletter no names are mentioned: who are the people involved who want to organize a separate division? Are they members who are Fellows of the APA who could easily enough be taken in as Fellows in the Consulting Division? Or is there a reason similar in nature to the cause of the conflict in the Illinois Psychological Association? There, there is a conflict between M.A.'s and Ph.D.'s. Unless it is on a difference in educational requirements, I can see no reason for another division, but can see a real purpose satisfied by the Consulting Division."

From Laurance F. Shaffer: "I share your concern about the move by Dr. Louis Gellermann to establish an "Association of Psychologists in Private Practice". I am in strong agreement with the thoughts expressed in your letter to him of May 26. It would be most unfortunate to have another splinter group representing so specialized an interest. Incidentally, however, there is another consideration. The Division of Consulting Psychologists of the APA was founded as a group to represent private practice, and to some extent still fulfills that function. I have held for a long time that the Division of Consulting Psychologists should consolidate with the Division of Clinical & Abnormal for people interested in the clinical area, and with the Division of Industrial Psychology for those whose consulting work is in the industrial field. Therefore, I will not press the point that the private practicing psychologists should use the Division of Consulting Psychology as their medium of expression. However, if the question of an additional Division comes up in the Board of Directors or in the Council of Representatives, I feel sure that a stand will be taken that the proposed new Division completely overlaps the functions of the Division of Consulting Psychology."

From D. Rapaport to L. Gellermann: "Thank you for having forwarded to me the mimeographed materials of the "Association of Psychologists in Private Practice." This material came to me as an individual and not as to the Secretary of the Division of Clinical and Abnormal Psychology. Please consider my answer the expression of my private views:

"I shall not join this association nor shall I sign a petition to the APA Council of Representatives to approve the organization of a Division of Psychologists in Private Practice. My reasons are the following: I do not see that there was an attempt made so far within the Division of Clinical and Abnormal Psychology to see whether or not the interests of psychologists in private practice can or cannot be well protected within the framework of this Division. I do not see that the interests of psychologists in private practice would be well served at this time by organizing a special Division of this sort; it is very likely that such organization would only exacerbate the tension with the psyciatrists and would not facilitate the efforts on which so much energy was spent of coming to equitable terms with the American Psychiatric Association. I do not see that by splintering the body of clinical and abnormal psychologists we would attain a better and more-heeded representation of our interests within the APA.

"This expression of my opinion is perhaps more rigid sounding than I intended it to be. Please take this merely as an indication of my real concern. On the other hand, I would be perfectly willing to listen to reason and be convinced if my arguments would prove false. So, if you don't consider it a waste of time to write to me answering my arguments, your communication will be welcome."

David Rapaport's letter was circulated among the members of the Executive Committee of the Division (in the information letter #8) and was uniformly approved by all members of the Executive Committee. The officers of the Division wish to stress

that the organizers of the planned Division of Psychologists in Private Practice have not made a systematic attempt to test whether or not the Committee on Private Practice of the Division of Clinical and Abnormal Psychology can serve as a proper outlet and focus for the problems and activities of the clinical psychologists in private practice.

THE RECOMMENDATIONS OF THE MEMBERSHIP COMMITTEE

Below is the list of persons whose applications for membership (Fellow and Associate) have been unqualifyingly recommended by the Membership Committee. The list includes all persons whose applications were received before the announced dealine of February 15 of this year. The purpose of announcing the list in advance is to enable the membership to study the recommendations and to register any possible objections. Comments should be sent either to the Secretary of the Division, Dr. David Rapaport, or to the Chairman of the Membership Committee, Dr. Robert Challman, before September 5th so that they may be available at the Executive Committee meeting.

In the past two years publication of the Membership Committee's list of recommended persons has caused some misunderstanding. To avoid repetition of same the following points regarding method of election to membership should be stressed: (1) These published lists of the Membership Committee are only recommendations and (2) must be approved by the Executive Committee. (3) The approved list is then submitted to the membership at the yearly meeting for final vote. (4) Associates are definitively elected by the vote of the membership at the yearly meeting; election of Fellows still has to wait for final approval by the Council of Representatives of the APA. (5) Some persons who filed applications prior to the deadline will, nevertheless, not find their names on the list below. These are persons whose applications were either disapproved by the Membership Committee or on whom the Committee was unable to give an unequivocal recommendation. Both these applications will again be reviewed by the Executive Committee. Those acted upon favorably will be added to the list and submitted for final vote to the membership.

Applicants for Fellow in Clinical Psychology with Grandfather Rights:

Calhoon, Clair H.
Conkey, Ruth C.
Friedline, Cora L.
Gould, Miriam C.
Greene, Katherine B. G.

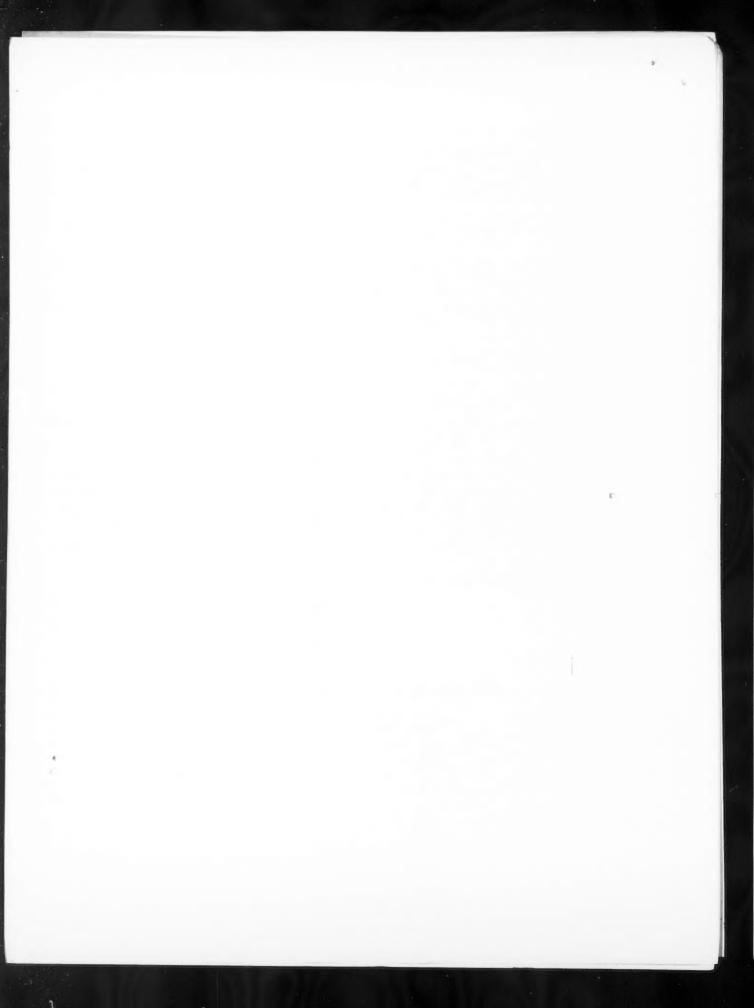
Macvaugh, Gilbert
Pignatelli, Myrtle E. L.
Skinner, Charles E.
Starr, Anna S. (Mrs. Henry E.)
Sward, Keith

Other Applicants for Fellows

Bergman, Paul
Bettelheim, Bruno
Blumenthal, Seymour
Bowie, Carol
Burgess, Thomas O.
Carlson, Wendell R.
Chase, Genevieve
Cornsweet, Albert
Cutsforth, Thomas
Doyle, Charles
Elonen, Anna
Forer, Bertram
Frenkel-Brunswik, Else
Gould, Rosalind
Graham, Virginia

Gregory, Wilbur S.
Hruza, Thelma E.
Key, Cora B.
Kirkner, F. J.
Kunst, Mary S.
Lehner, George F. J.
Long, Luther C.
Lorr, Maurice
Martin, John R.
Mendenhall, Mildred C.
Mowrer, O. Hobart
Nadel, Aaron B.
Pattie, F. A.
Raimy, Victor
Rautman, Arthur L.

Reichard, Suzanna Singer, William B. Thiesen, John W. Thorpe, Louis P. Weitz, Robert D. Yager, J. Lewis



Applications for Associate

Albright, Louis C., Jr. Alden, Priscilla J. Anderson, Albert L. Assum, Arthur L. Axelrod, David W. Bagby, James W., Jr. Barkley, Bill J. Baugh, Verner S. Barnett, James G. Beran, Marianne Berenda, Ruth W. Bramhall, Elinor E. Brownfain, John J. Buehler, Roy E. Butler, Octavia P. Call, Catherine M. Canady, George H. Carp, Abraham N. Cohen, David Cohen, Theodore B. Danehower, Harold S. Deahl, Katherine DeMartino, Manfred F. Dosier, Charlotte H. (Mrs.) Eiduson, Bernice T. Elliott, Margaret M. Elste-Molish, Ellen A. Feingold, S. Norman Ferguson, Charles K. Ferguson, Robert G. Feuerburgh, Joseph Flinn, Helen L. Gardner, George E. Gilman, Thelma T. Goldman, Alexander Granick, Samuel Greene, Ronald R. Grey, Alan L. Gunn, Helen V. Gurevitz, Saul Hartley, Ruth E. Hawkins, Hermione H. Henderson, Philip S.

Hickman, Norman W. Hilgeman, Lois M. Hodgson, Gerald L. Holodnak, Helen B. Juzak, Tatania Jameson, Augusta T. Kates, Solis L. Kells, Doris M. Kitzinger, Helen Lenga, Frances M. Lockwood, Wallace V. Michal-Smith, Harold I. Nicola, Eugenia Orbison, William D. Patterson, Virginia L. Pivnick, Harold Prensky, Samuel J. Puzzo, Frank S. Reed, Harold J. Risch, Frank Ritter, Anne M. Rosenwald, Alan K. Roswell, Florence G. Rubin, Harry K. Safrin, Renate K. Schafer, Benjamin R. Schiffer, Jerome Schwartz, David B. Seyfarth, V. Elise Sless, Bernard Spranger, Otto B. Startz, Adele K. Steisel, Ira M. Stewart, Barbara M. Strother, George B. Taliferro, Mary L. Topping, Marion B. Ullman, Charles A. Vinson, David B. Vorhaus, Pauline G. Witzeman, B. Evangeline Zuckerman, Stanley B.

COMMITTEE ON EXAMINATIONS IN CLINICAL PSYCHOLOGY:

A communication from the Secretary of this Committee indicates that the Committee members agreed on a plan to establish a "clearing house" for the exchange of information regarding (a) course requirements and internship provisions in clinical psychology at various universities, (b) the number and nature of "hurdles" an individual is expected to pass in order to earn the Ph.D. degree, and (c) types of examinations—specific course exams, prelims, etc.--used at different universities.